## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10750918

| CLAIMS AS FILED - PART I   |   |   |                                       |                                   |             |                  | S   | SMALL ENTITY |  |       | OTHER THAN |                        |  |
|--|---|---|---------------------------------------|-----------------------------------|-------------|------------------|-----|--------------|--|-------|------------|------------------------|--|
|  |   |   | (Column 1)                            |                                   | (Column 2)  |                  | , Т | TYPE         |  | OR    |            |                        |  |
| TOTAL CLAIMS   |   |   | 10                                    |                                   |             |                  |     | RATE         | FEE  | 7     | RATE       | FEE                    |  |
| FOR  |   |   | NUMBER                                | NUMBER FILED                      |             | NUMBER EXTRA     |     | BASIC FE     | 385.00   | OR    | BASIC FEE  | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |   |   | (                                     |                                   | * (         |                  |     | X\$ 9=       |  | OR    | X\$18=     |                        |  |
| INDEPENDENT CLAIMS   |   |   | 3 minus 3 = *                         |                                   | *           | 0                |     | X43=         |  | OR    | X86=       | ·                      |  |
| MU   | JLTIPLE DEPEI   | NDENT CLAIM P                             | RESENT                                |                                   |             |                  |     | +145=        |  | OR    | +290=      |                        |  |
| * If the difference in column 1 is less than zero, enter "0  |   |   |                                       |                                   |             | column 2         | L   | TOTAL        | <del>                                     </del> | OR    | TOTAL      |                        |  |
| CLAIMS AS AMENDED - PART II  |   |   |                                       |                                   |             |                  |     |              | <del></del>                                      |       | OTHER      | THAN                   |  |
|  |   | (Column 1)                                | · · · · · · · · · · · · · · · · · · · | (Column 2) (Colu                  |             |                  |     | SMALL        | ENTITY   | OR    | SMALL      |                        |  |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHE<br>NUMB<br>PREVIO<br>PAID F | BER<br>USLY | PRESENT<br>EXTRA |     | RATE         | ADDI-<br>TIONAL<br>FEE                           |       | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus                                 | **                                |             | =                |     | X\$ 9=       |  | OR    | X\$18=     |                        |  |
|  | Independent   | *<br>ENTATION OF MI                       | Minus                                 | ***                               |             | =                |     | X43=         |  | OR    | X86=       |                        |  |
|  | FINOT FRESL   | MATION OF IVI                             | JUIPLE DEF                            | PENDENT                           | CLAIIVI     |                  |     | +145=        |  | OR    | +290=      |                        |  |
| •  |   |   |                                       |                                   |             |                  |     | TOTAL        |  | י בו  | TOTAL      |                        |  |
|  |   | (Column 1)                                | •                                     | (Colum                            | O)          | (Column 3)       | ΑĽ  | DIT. FEE     |  | JO: 1 | ADDIT. FEE |                        |  |
| _  |   | CLAIMS                                    |                                       | HIGHE                             | ST          | (Column 3)       | ır  |              | ADDI-  | 1 1   |            | ADDI-                  |  |
| AMENDMENT B  |   | REMAINING<br>AFTER<br>AMENDMENT           | ·                                     | NUMB<br>PREVIOL<br>PAID F         | USLY        | PRESENT EXTRA    |     | RATE         | TIONAL   |       | RATE       | TIONAL                 |  |
| MON  | Total   | *   | Minus                                 | **                                |             | =                |     | X\$ 9=       |  | OR    | X\$18=     |                        |  |
| AME  | Independent   | *   | Minus                                 | ***                               |             | = .              |     | X43=         |  | OR    | X86=       |                        |  |
| ,  | FIRST PRESE   | NTATION OF ML                             | JLTIPLE DEP                           | 'ENDENT (                         | CLAIM       |                  | \   | +145=        |  | OR    | +290=      |                        |  |
|  |   |   |                                       |                                   |             |                  | L   | TOTAL        |  | L     | TOTAL      | -                      |  |
|  |   |   |                                       |                                   |             |                  |     | DIT. FEE     | ii.  | OR ,  | ODIT. FEE  |                        |  |
|  |   | (Column 1)<br>CLAIMS                      |                                       | (Columi<br>HIGHE                  |             | (Column 3)       |     | *            |  | -     |            |                        |  |
| AMENDMENT C  | •   | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUMBE<br>PREVIOL<br>PAID FO       | ER<br>JSLY  | PRESENT<br>EXTRA |     | RATE         | ADDI-<br>TIONAL<br>FEE                           |       | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus                                 | **                                |             | =                | ;   | X\$ 9=       |  | OR    | X\$18=     |                        |  |
|  | Independent   | *   | Minus                                 | ***                               |             | =                |     | X43=         |  |       | X86=       |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                                   |             |                  |     | /\ \\ -      |  | OR    | 7,00-      |                        |  |
|  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                       |                                   |             |                  |     | 145=         |  | OR    | +290=      | <del>, -</del>         |  |
| ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                                       |                                   |             |                  |     |              |  |       |            |                        |  |